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17548 U.S.

# UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new non-provisional applications under 37 CFR 1.53(b))

U.S. PTO  
22388 10/675832  
093003

Attorney Docket No.	HSJ9-2003-0070US1 (0107-0031)		
First Inventor or Application Identifier:	Freitag		
Title:	SPIN VALVE SENSOR HAVING AN ANTI PARALLEL (AP) SELF-PINNED LAYER STRUCTURE COMPRISING COBALT FOR HIGH MAGNETOSTRICTION		
Express Mail Label No.:	EV 300426057 US		
<b>Application Elements</b> <small>(See MPEP chapter 600 concerning utility patent application contents)</small>		<b>ADDRESS TO:</b> MAIL STOP PATENT APPLICATION Commissioner For Patents P.O. Box 1450 Alexandria, VA 22313-1450	
1. <input checked="" type="checkbox"/> <b>Fee Transmittal Form</b> <small>(Submit an original, and a duplicate for fee processing)</small>			
2. <input checked="" type="checkbox"/> <b>Specification</b> [Total Pages 23] <small>(preferred arrangement set forth below)</small> <ul style="list-style-type: none"> <li>• Descriptive title of the Invention</li> <li>• Cross References to Related Applications</li> <li>• Statement Regarding Fed sponsored R&amp;D</li> <li>• Background of the Invention</li> <li>• Brief Summary of the Invention</li> <li>• Brief Description of the Drawings (if filed)</li> <li>• Detailed Description</li> <li>• Claim(s)</li> <li>• Abstract of the Disclosure</li> </ul>			
3. <input checked="" type="checkbox"/> <b>Drawing(s) (35 USC 113)</b> [Total sheets 9] 4. <input checked="" type="checkbox"/> <b>Oath or Declaration</b> [Total Pages 2]			
a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from prior application (37 CFR 1.63(d)) <small>(for continuation/divisional with Box 17 completed) (Note Box 5 below)</small>			
i. <input type="checkbox"/> <b>Deletion of Inventor(s)</b> <small>Signed statement attached in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</small>			
5. <input type="checkbox"/> <b>Incorporation by Reference</b> (useable if Box 4b is checked) <small>The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</small>			
17. If a <b>CONTINUING APPLICATION</b> , check appropriate box and supply the requisite information: <small>Continuation      <input type="checkbox"/> Divisional      <input type="checkbox"/> Continuation-In-Part      of prior application no.:          Prior application information: Examiner: Group/Art Unit:</small>			
<b>18. CORRESPONDENCE ADDRESS</b>			
— Customer Number ( ) Or Bar Code Label			
OR			
<input checked="" type="checkbox"/> Correspondence Address Below			
<b>NAME</b> <input type="text"/>		<b>ATTN:</b> John J. Oskorep	
<b>ADDRESS</b> <input type="text"/>		One Magnificent Mile Center 980 N. Michigan Avenue, Suite 1400 Chicago, Illinois 60611	
Telephone: 312-222-1860		Fax No.: 312-214-6303	
Name (print/type) <input type="text"/>		Registration No.: <small>(Attorney/Agent)</small>	
Signature 		Date <small>30 Sept 2003</small>	

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U.S. PTO

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## FEE TRANSMITTAL

Attorney Docket No.	HSJ9-2003-0070US1
First Named Inventor:	Freitag
Application Number	not yet assigned
Filing Date:	not yet assigned
Examiner Name:	not yet assigned
Group/Art Unit:	not yet assigned

<b>TOTAL AMOUNT OF PAYMENT:</b>	<b>\$ 970.00</b>
<b>METHOD OF PAYMENT (check One)</b>	<p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and/or credit any over payment to:</p> <p>Deposit Account No.: 50-2587 Deposit Account Name: Hitachi Global Storage Technologies</p> <p><input checked="" type="checkbox"/> Charge any Additional Fee Required Under 37 CFR 1.16 and 1.17</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>

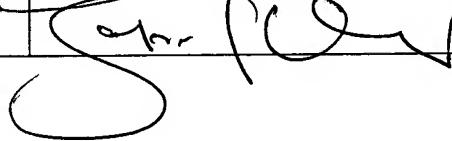
### 2. UTILITY Basic Filing Fee & Claims

(1) For	(2) No. filed	(3) No. extra	(4) Large Entity	(5) Small Entity	(6) Calculations
Basic Filing Fee	XX	XX	\$ 750.00	\$375.00	\$ 750.00
Total Claims	30 - 20 =	10	X \$ 18.00	X \$ 9.00	\$ 180.00
Independent Claims	3 - 3 =	0	X \$ 84.00	X \$ 42.00	\$ 0.00
Multiple Dependent Claim(s) (if applicable)		0	\$ 280.00	\$140.00	\$ 0.00
<b>Total of above Calculations =</b>					<b>\$ 930.00</b>

Basic Filing Fee	Large Entity	Small Entity	Total
Design filing fee	\$ 330.00	\$ 165.00	\$ 0.00
Reissue filing fee	\$ 740.00	\$ 370.00	\$ 0.00
Provisional filing fee	\$ 160.00	\$ 80.00	\$ 0.00
<b>Total of above Calculations =</b>			<b>\$ 0.00</b>

### 3. ADDITIONAL FEES

Fee Description	Large Entity	Small Entity	Other
Assignment Recordation	\$ 40.00	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
<b>TOTAL:</b>			<b>\$ 40.00</b>

Name (print/type)	John J. Oskorep	Registration No.: (Attorney/Agent)	41,234
Signature		Date	30 Sept 2003

"EXPRESS MAIL" MAILING LABEL NO. EV 300426057 US

DATE OF DEPOSIT: 30 Sept 2003

I HEREBY CERTIFY THAT THIS PAPER OR FEE IS BEING DEPOSITED  
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INDICATED ABOVE AND IS ADDRESSED TO THE ASSISTANT  
COMMISSIONER FOR PATENTS, WASHINGTON, D.C. 20231.

John J. Oskorep

NAME

John J. Oskorep

SIGNATURE